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ALIMA

THE EFFECTIVENESS OF ALIMA'S ACTION DEPENDS ON STRENGTHENING THE HUMANITARIAN AND MEDICAL FABRIC TO WHICH THE NGO CONTRIBUTES.



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FOREWORD

"We have to fight." As humanitarians, we are reluctant to use hostile language, but today, this sentence, often used by colleagues, is necessary. Providing care wherever it is needed has become increasingly challenging.

Intense war in Sudan, violent clashes in the Eastern Democratic Republic of the Congo, and volatile political and security situations in the Sahel push millions of people out of their homes, leaving them vulnerable and hard to reach for basic care. ALIMA's teams are courageous. Despite escalating security and health challenges, as well as financial pressures from severe funding shortfalls compared to humanitarian needs, ALIMA maintained significant operational growth in 2023. Nearly 2.8 million people received life-saving care through ALIMA, an increase of over 500,000 from 2022.

The year was also marked by numerous epidemic emergencies, including cholera, measles, Lassa fever, and MPox. ALIMA treated patients, raised awareness among populations to limit the spread of diseases, and stayed true to its commitment to research. In 2023, ALIMA became the scientific coordinator of the international research consortium Integrate, which aims to find more effective treatments for Lassa fever. Additionally, from the onset of the MPox epidemic in the Democratic Republic of the Congo, ALIMA has established itself as a key player. These lesserknown and poorly treated diseases deserve our full attention, and ALIMA is determined to innovate to address them.

These challenges were met amid significant changes within ALIMA's management. The sudden loss of our colleague and friend Maurice Kyungu, Chief Financial Officer, showed the team's incredible resilience, especially the Finance team, who successfully took over until the arrival of his successor. Two new directors, for Communication and Development, will allow us to work ambitiously on ALIMA's reputation and raising private funds, leading us to be even more responsive to crises in the years to come.

I WOULD LIKE TO EXTEND A HUGE CONGRATULATIONS TO THE TEAMS AND TO ALL THOSE WHO WEAR THE ALIMA LOGO AND MAKE US PROUD.

DR. RICHARD KOJAN

ALIMA'S MODEL

ALIMA is certain that an effective humanitarian response requires, when possible, a strong partnership with local organizations, built around co-management and shared responsibility in project design, planning, and implementation. This is why ALIMA collaborates with national NGOs in the five countries where it operates.

We combine our strengths when collaborating with local NGOs:

We join our forces when collaborating with local NGOs:

- they contribute their expertise in the field,
- and ALIMA facilitates access to international funding and strengthens their operational capacities.

Alerte Santé / Chad

Since 2012, ALIMA and Alerte Santé have established renowned expertise in providing healthcare to women and children under five, in emergency response to epidemics, as well as in healthcare access for both displaced persons and refugees.

BEFEN: Well-being of Women and Children in Niger ALIMA and BEFEN provide free medical care to children suffering from severe acute malnutrition and diseases such as malaria, diarrhea, and acute respiratory infections. They also provide reproductive health services and respond to emergencies during epidemics or population movements.

AMCP-SP: Medical Alliance Against Malaria-Population Health (AMCP-SP) / Mali AMCP-SP operates in the fields of health, nutrition, operational research, and humanitarian emergencies. ALIMA and AMCP-SP have been working together since 2011 to reduce mortality among children under five and pregnant women.

We also share power:

- local NGOs hold dedicated seats on our Board of Directors,
- and their leaders have the same power of influence as those of ALIMA.

KEOOGO and **SOS** Médecins / Burkina Faso KEOOGO KEOOGO provides medical care and protection to children. SOS Médecins Burkina Faso responds to health emergencies, including providing care for malnutrition and HIV/AIDS for atrisk populations. Since 2012, ALIMA has been working with these two organizations to implement medical and nutritional projects in the country's North and Center-North regions.

DEMTOU Humanitarian / Cameroon

DEMTOU Humanitarian operates in the areas of health, nutrition, water, hygiene and sanitation, food security, and promotes social cohesion in Cameroon. ALIMA and DEMTOU Humanitarian began collaborating more closely in 2022 at an operational level, and this partnership is set to strengthen in the coming years.













2023 FIGURES





Million Euros budget





257,033 🔗

Children suffering from malnutrition cared for



Million patients cared for





Countries

157,393 🦻



Patients that received mental health consultations

Projects

67,617



Birth assisted

Environmental projects

193,084 🛌 **Hospitalizations**



Million children under 5 cared for

EMERGENCY RESPONSES

ALIMA's Emergency and Opening Service (EOS) teams provided emergency care in areas affected by health or security crises, including a response tailored to the needs of populations affected by the conflict in Ukraine. In this heightened conflict context, mobile teams provided 22,838 consultations*.

In Nigeria, the EOS supported local teams in addressing a diphtheria outbreak in Kano, the country's second-largest city, treating 877 patients in hospitals.

Additionally, while ALIMA was already present in Haiti in 2011, an exploratory mission was recently conducted to meet the needs of populations affected by ongoing security and humanitarian crises in the capital Port-au-Prince. Other exploratory missions were also carried out in Somalia and coastal West African countries (Benin, Togo, Côte d'Ivoire).

*see Ukraine page

BURKINA FASO

KEY PROJECT

1,000 Days Project

This project aims to improve the provision of medical and nutritional care for pregnant and breastfeeding women, as well as children under 5. Led by ALIMA and carried out in collaboration with the NGO GRET and the Higher Institute of Population Sciences (ISSP, overseeing the research component), it operates within the health districts of Sig-Noghin and Nongr-Massom, in the capital Ouagadougou. Specifically, the project targets the first 1,000 days of a child's life, from conception and pregnancy to the child's second birthday. Through comprehensive support, the project seeks to strengthen the resilience of mother-child pairs benefiting from the social safety net program (10,000 beneficiaries), focusing on preventing malnutrition and childhood illnesses.

With over 358,000 beneficiaries (including 48,519 children under 5 and 35,102 pregnant and breastfeeding women), the 1,000 Days Project has also provided training to 66,837 women of childbearing age on the MUAC-mother approach. This technique for preventing malnutrition involves early detection using a simple bracelet to measure upper arm circumference, which is accessible for use at home.

Patients received curative consultations, including 96,263 children under the age of 5.

237,687



Emergency Secondary Healthcare Access Response for Crisis-Affected Communities in Centre-North and Sahel Regions of Burkina Faso

This project was implemented across the health districts of Barsalogho as well as in the Kaya and Dori Regional Hospitals. ALIMA's efforts have benefited 1,866 individuals: 1,680 patients received treatment, and 186 health personnel received training. Additionally, 9,672 individuals benefited from surgery, anesthesia, or mental health consultations.

TESTIMONY:



"I have been visiting the Center for Health and Social Advancement (CSPS) for over nine years. I have witnessed significant improvements in this center since the launch of the 1,000 Days Project set up by ALIMA. Today, when a woman comes to give birth, the process is much smoother. Previously, the center had no electricity or running water. When a woman came to give birth, attendants had to fetch water to clean the room. There was not enough space, forcing women in labor and those who had just delivered to share the same room. Today, women awaiting childbirth are accommodated separately from those who have already delivered. There is also lighting, access to water, and the delivery room is cleaned after each birth. I thank ALIMA for providing us with a new maternity facility. I am extremely pleased, it's great. We benefit from it now and I know it will benefit the next generation."

Maimouna, beneficiary of the 1,000 Days Project

CAMEROON

KEY PROJECT

Reducing the Morbidity and Mortality of Refugees, **Displaced Persons, and Host Populations Amidst Crises in** the Lake Chad Basin and Anglophone Regions.

In 20 Integrated Health Centers (IHCs) and 5 secondary structures across the districts of Bamenda, Bali, Batibo, Santa, Fontem, Makary, Fotokol, and Mada, the project aims to reduce morbidity and mortality rates through an emergency response that ensures access to quality primary and secondary healthcare, as well as nutritional care for children under 5 years old from both displaced and host populations impacted by crises. ALIMA supports the entire population in pediatrics, sexual and reproductive health (antenatal and postnatal care, childbirth support, and family planning), and mental health care. To prevent severe acute malnutrition among children, ALIMA provides training on the use of mid-upper arm circumference (MUAC) measures for women of childbearing age and caregivers of children. ALIMA is also engaged in enhancing the skills of health workers, having trained 65 individuals in the integrated management of childhood illnesses, malnutrition, sexual and reproductive health, and mental health. Furthermore, ALIMA assists supported facilities to ensure they meet and maintain international standards, including rehabilitating and upgrading waste areas (ash pits, incinerators, handwashing stations, etc.), as well as securing the cold chain or solar power installations.

181,053



curative consultations

Medical-Surgical Assistance and Empowerment Project for Women and Children Affected by the Lake Chad Basin Crisis in Cameroon's Far North Region

In partnership with Maroua Regional Hospital and the Association to Combat Violence Against Women in the Far North (Association pour la Lutte contre les Violences faites aux Femmes dans l'Extrême Nord, ALVF-EN)

Before the Boko Haram conflict reached the region in 2013, Cameroon's Far North had already been facing several security challenges related to rural crime, trafficking, and inter-community conflicts. The crisis sparked by these armed groups has significantly deteriorated the population's living conditions. This project aims to reduce morbidity and mortality rates among women and children in a context where their vulnerability continues to escalate. It offers free access to surgical interventions, addressing conditions like obstetric fistulas and cleft lip and palate, alongside medical care, particularly focusing on issues such as sexual violence, cervical cancer screening, and treatment of precancerous lesions in women. Crucial psychosocial support is also integrated into the project through psychological assistance and the implementation of income-generating activities for women (mothers of children who underwent cleft lip and palate surgery and those treated for fistulas).





"My job is to raise awareness, inform, and answer questions from community members regarding ALIMA's role and services. I inform and answer questions from many people, some of whom live far away from healthcare facilities. I do this awareness-raising work because there are always newcomers unaware of our services and others who have doubts. I'm there for them. I often share my personal experiences, especially as a mother of two children under the age of 5. I have benefited from the various services offered by ALIMA, not because of my role as a community worker, but simply as a woman. Consultations and childbirth were provided to me free of charge. After a year of fieldwork, meeting with community members, and raising awareness, I noticed the message was getting through. This is reflected in the growing number of people from the areas I cover. As a community worker, the most important part is to meet the people and talk about ALIMA. We have built a relationship of trust."

Christabelle, 32, farmer and community outreach worker.

CENTRAL AFRICAN REPUBLIC

KEY PROJECT

Improved Access to Sexual and Reproductive Health (SRH) Information and Services in Bangui, Bimbo, Boda, Damara, and Bocaranga

This project aims to strengthen national institutions, communities, and stakeholders in delivering comprehensive sexual and reproductive health services of high quality. In addition to providing SRH care, ALIMA's initiative seeks to empower these actors to better prevent and address gender-based violence (GBV). In CAR, ALIMA has established kiosks to facilitate access to information, including awareness-raising and guidance for adolescents and young people. As part of these efforts, ALIMA offers psychological and clinical support for victims of GBV, conducts sexual and reproductive health and rights (SRHR) activities, and provides training for healthcare providers in sexual and reproductive health (SRH) and GBV care.

97,584 **••**

consultations conducted in health facilities

Wakobo Ti Kodro Project: Innovation to Address High-risk Pregnancies



The Wakobo Ti Kodro research project aims to evaluate an innovative approach to improve the identification of high-risk pregnancies in the Central African Republic. The project focuses on collaborating with traditional birth attendants trained in detecting complicated pregnancies. Thanks to an easy-to-use mobile application available in the local language and with QR code technology, these matrons raise awareness among pregnant women about the signs of high-risk pregnancies, allowing for better care in health centers.

TESTIMONY:



Nelly, a matron involved in the Wakobo Ti Kodro project, shares her experience.

"Before, we didn't know anything about high-risk pregnancies. With this project, we received training. Our role is to support pregnant women and refer them to health centers, if complications arise. Being closely connected to the community, many people have accepted my new role. Members of my community appreciate my work and understand its importance. This project was initiated to reduce maternal mortality rates – if a woman has complications during a home birth, she can lose a lot of blood and risk dying. This project aims to encourage women to give birth in health centers."

CHAD

KEY PROJECT

Emergency Project to Meet the Needs of Sudanese Refugees and Chadian Returnees in Eastern Chad

Launched in May 2023, the project has responded to humanitarian needs in two provinces.

In the Ouaddaï Province, within the Adré health district, four mobile clinics have been deployed. ALIMA and its local partner, Alerte Santé, have provided primary health care and facilitated the referral of serious cases to the Adré district hospital. To improve the well-being and survival of individuals with chronic diseases, ALIMA/Alerte Santé has supported outpatient consultations at the Adré hospital for the screening, monitoring, and management of chronic conditions. In response to the influx of over 800 wounded in June 2023 at the Adré hospital, ALIMA/Alerte Santé deployed a medical team to the refugee transit site to stabilize the injured before referring them to the surgery department supported by the NGO Médecins Sans Frontières (MSF). A surgical team, consisting of a surgeon and an anesthesiologist, was deployed following the rehabilitation of the Adré health district operating room.

In parallel, as refugees were relocated to Sila province in June 2023, ALIMA/Alerte Santé opened a health post in the Zabout refugee camp, which accommodated over 42,000 refugees. Preventive and curative consultations, essential care, nutrition services, sexual and reproductive health care, mental health support, and vaccination services were provided. ALIMA/AS also supported the Doroti health center with mother-child health services and assisted the maternity department of the Goz-Beida provincial hospital in managing obstetric emergencies for both refugees and the host population.



refugees received care from ALIMA's teams.

Capacity building for healthcare staff on the management of acute malnutrition (UNT-École Project).

Set up in 2017 in response to the shortage of qualified personnel for quality management of malnutrition in health facilities, the "UNT (Therapeutic Nutritional Unit)-School" project has made it possible to train Chadian medical staff working in Chad's 23 provincial health delegations.

The training takes place in two phases: a five-day theoretical phase facilitated by trainers from the Direction de l'Alimentation et de la Nutrition Appliquée (DANA), in collaboration with the ALIMA team, followed by a 15-day practical phase consisting of immersion in the UNT, during which trainees are familiarized with the clinical management of acutely malnourished children. Since its inception, 98,000 patients have been treated.

TESTIMONY



During ALIMA/Alerte Santé's intervention, a 15-year-old girl arrived at the health center with her mother after being informed about mental health services by community relays. During an interview, the teenager revealed she had been the victim of sexual violence and threats when a man broke into her house.

The young girl was attacked one evening while she was at home. "Since this happened, I don't have an appetite and I don't sleep well. I mostly have stomach aches and vomit every time I eat, that's why I don't even want to touch the food anymore..." she explained.

The teenager was attended by the medical teams of ALIMA/Alerte Santé and received medical and psychosocial care. This treatment aims to provide psychosocial support through stress management techniques and EMDR therapy (Eye Movement Desensitization and Reprocessing) to address post-traumatic syndromes. The psychosocial support provided by ALIMA played a crucial role in her recovery.

DEMOCRATIC REPUBLIC OF THE CONGO

KEY PROJECT

Cholera Epidemic Response Project in Rusayo Displaced Persons Camp

Since December 2022, ALIMA has been providing emergency medical care and free medicine to the most vulnerable individuals in displaced communities within the Rusayo health area, located in the Nyiragongo Territory, on the outskirts of Goma. Teams have set up tents in the Rusayo displacement camp to provide consultations and primary health care for families, including malnutrition screenings for children, prenatal consultations for pregnant women, and delivery assistance. Survivors of sexual violence also receive urgent medical care and psychological support.

ALIMA was the first partner of the Ministry of Health to fight the cholera epidemic in the area, providing patient care and organizing vaccination campaigns. Approximately 32,000 people have been vaccinated against cholera by ALIMA's teams.

survivors of sexual violence received treatment

3,276 😣

Study and Response Project to the Monkeypox Epidemic in Partnership with the Institute of Tropical Medicine (ITM) Antwerp and the Institut National de la Recherche Biomédicale (INRB)

The Monkeypox outbreak in Maniema Province was officially declared by the Ministry of Health on December 9, 2021. The lack of support for free care and the supply of medicine and equipment in the Tunda health zone has made managing Monkeypox cases very complex. In partnership with ITM (Institute of Tropical Medicine in Antwerp) and the national medical research organization (INRB), ALIMA is implementing a response to the Monkeypox epidemic in the Tunda health zone (Maniema).

This project also includes strengthening diagnosis and research on the disease, including the characterization of its clinical, biological, and biochemical profile in collaboration with national and international research partners. Through this initiative, ALIMA is positioning itself as a leader alongside the WHO and project partners.

TESTIMONY:



"I live in the Rusayo IDP camp, and I have been here for one month. I am from Massisi Mushaki where my husband and I cultivated our own fields. My entire family, made up of myself, five children, and my husband, fled our home together. First we went to Sake, where we stayed with a relative, but there was not enough space for everyone there. The next day, we came to the camp, but my husband could not tolerate the conditions, so he went back to Sake with one child. I have not heard from him. I am now here alone with four of our children.

A team of people passed through the camp informing us about a measles vaccination campaign taking place, so I came here to get Thomas [my son] vaccinated a few days ago. But despite that, he is unwell and very weak so I have brought him back. I am waiting to consult with the nurses. I don't know what we would have done if this health center was not here. I would like to return to Massisi as soon as the situation becomes secure once again, but I don't know when that will happen.

Esperence, 30, living in the Rusayo IDP Camp

ETHIOPIA

KEY PROJECT

Lifesaving nutrition support to vulnerable, drought-affected communities in Barey, Elkare and Hargelle districts in Afder zone in Somali Region of Ethiopia

This project aims to improve the nutritional status of pregnant and lactating women and children between 0-59 months old in drought-affected areas of the Somali region through the support of curative and preventive nutrition specific and sensitive interventions. The project is increasing access to acute malnutrition treatment services for children under five years old, and pregnant and lactating women in the Hargele Woreda, while also increasing access to preventive and promotive nutrition services.

Emergency medico-nutritional assistance for IDPs and host communities affected by the drought in Afder zone, Somali region

The aim of this project is to contribute to the reduction of mortality and morbidity among Internally Displaced Persons (IDPs) and vulnerable host communities, especially children under 5 years old, adolescent girls, and pregnant and breastfeeding mothers. It also aims to improve on the well-being and human dignity of crisisaffected communities in the Somali Region of Ethiopia through integrated Health, Nutrition, Mental Health and Psychosocial Support (MHPSS), Water, Sanitation and Hygiene (WASH) services in health care facilities, and gender sensitive response.





net de santé de la Mère

et de l'Enfant

KEY PROJECT

Community Project to Improve Reproductive, Maternal and Newborn Health Care

This project was implemented in November 2022 and is scheduled to continue until 2025, operating in six health centers and 35 health posts within the Telimele Health Prefecture. One innovative aspect of this community project is the introduction of mobile ultrasound scanners, with midwives trained to perform ultrasound examinations. At the community level, six platforms have been established, engaging 635 men as "model husbands" who receive education on sexual and reproductive health, as well as maternal and newborn health services. Their role is to promote family planning within their community.

In 2023, the project provided training to 67 individuals in Basic Emergency Obstetric and Newborn Care (BEMONC) or Comprehensive Emergency Obstetric and Newborn Care (CEMONC), and trained 29 people in ultrasound. Over 5,000 initial antenatal consultations were conducted and 2.225 deliveries were assisted in the six supported health centres. Additionally, 6.502 women were educated on maternal and child health and access to healthcare services, while 2,754 adolescent girls on family planning. Furthermore, 5,012 adolescent girls and pregnant women had contact with a health worker.

> 1,598 ultrasound examinations conducted under the Community Project to Improve Reproductive, Maternal and Neonatal Health Care in Telimele



PREVAC UP (Partnership for Research on Ebola Vaccination)

The PREVAC UP (Partnership for Research on Ebola Vaccination) project aims to develop a reliable and effective vaccination strategy against Ebola virus disease. This project represents one of the largest Ebola vaccination trials to date, involving adults and children aged one year and above. It brought together African, European, and American research teams, collaborating in Liberia, Guinea, Sierra Leone, and Mali. In Guinea, the trial was conducted in partnership with the Ministry of Health, the National Ethics Committee for Health Research. (CNERS), the Maferinya Research Center, the National Department of Pharmacy and Medicines, and Inserm. On the ground, implementation was managed by ALIMA teams who recruited local volunteers for the trial in Conakry and Maferinya. Once vaccinated, the participants were monitored for five years. ALIMA worked on two study sites: Conakry and Maferinya, enrolling a total of 2,230 participants. Followup activities concluded in August 2023, with project activities ending in December 2023.

TESTIMONY



Mamadou is a "model husband". He raises awareness among the men within his community. He has two wives and his two youngest children were born in a health centre.

"Previously, women mainly gave birth at home. For the birth of one of my children, when my wife started bleeding, we had to rush her to Telimele, a journey that took 7 hours. For me, being a model husband means being supportive and present for your wife and children. Before, our women had no medical assistance. Today, I raise awareness among the men around me. When I show ultrasound images to other men, they are intrigued. I talk about the importance of prenatal consultations for their wives and support in health centers. As men, it is important to ensure our wives receive proper prenatal care and that our children are vaccinated nearby."

MALI

KEY PROJECT

Medical-nutritional Assistance Projects for Populations Affected by Crises and Conflicts in the Health Districts of Goundam and Diré, as Well as in the Ségou Region

ALIMA has been operating in the northern regions of Goundam and Diré since 2011. In 2023, this project conducted 64,855 primary curative consultations, provided treatment to 2,480 children under the age of 5 for acute malnutrition, and administered measles vaccinations to 5,119 children under the age of 12 months.

Since 2018, ALIMA has expanded its efforts to the Ségou region (Niono health district), assisting internally displaced persons. In 2023, the project conducted 38,441 consultations, including 14,842 for children under 5 years old, assisted 1,384 deliveries, and attended to the needs of 4,178 malnourished children under the age of 5.

102,188





OptiMA (Optimizing the Management of Acute Malnutrition)

ALIMA offers an innovative and simplified approach to managing malnourished children called OptiMA (Optimizing the Management of Acute Malnutrition). This method is characterized by:

- a single anthropometric measurement, the Mid-Upper Arm Circumference (MUAC), along with oedema, to identify the condition;
- a single treatment, ready-to-use therapeutic food, with dosage adjustments based on the child's improving condition;
- training families in the early detection of children malnutrition using the MUAC bracelet, which features a simple color-coded system (green, orange, red) to assess the child's health and effectively prevent the risk of severe complications.

In 2023, the OptiMA strategy was implemented in Mali, Niger, Nigeria, and Chad. That same year in Mali, 5,389 children aged 6 and 59 months received treatment, and 204,531 women were trained in the use of the MUAC bracelet to detect early signs of acute malnutrition in children.



"I have been in charge of the pharmacy at the Reference Health Center (CSREF) in Bandiagara since August 2023. My responsibilities include managing medications, organizing cabinets, and distributing medicines to Community Health Centers. In case of emergencies and if medicines are not available on-site, the managers at the CSREF sales depot call me to place emergency orders. Since our arrival, we've had the same feedback from the communities: the sales depot is seen as a great relief. Purchasing medications requires resources and can sometimes cost more than the consultation itself. We are the first NGO to provide free consultation in Bandiagara. I like to see happy faces, healthy populations, and to know that I am appreciated and recognized for my work."

Julien, Pharmacy Manager of the ALIMA/AMCP-SP project in Bandiagara

TESTIMONY

MAURITANIA

KEY PROJECT

Strengthening Access to Quality Medical and Nutritional Care for Vulnerable Populations in the Wilaya* of Brakna

As part of this project, ALIMA is supporting the pediatric services and Intensive Nutritional Rehabilitation Unit (INRU) in the hospitals of Aleg and Boghé, as well as the Ambulatory Therapeutic Feeding Centers (ATFC), to ensure access to quality primary health care for the population. In 2023, 7,567 outpatient pediatric consultations were conducted, including 6,013 for children under the age of 5. Additionally, 12,383 children under the age of one were vaccinated against measles, helping to prevent infectious diseases in young children. Moreover, 131,292 people were trained in the MUAC for Mothers approach, achieving 183% of the initial target. This success highlights the commitment to nutrition education and community capacity building to tackle malnutrition.

*Region

7,567 Sediatric outpatient



consultations

تحسين وصول الفنات السكانية التجرية وفعية هشة في ولاية لبراكنة موريتانيا المواعلية طبية وغذائية دات جودة Améliorer l'accès des populations vulneral dans la Wilaya du Brakna, en Maurital à des soins médico-nutritionnels de q



Capacity Building of the Expanded Plan on Immunization (EPI)

ALIMA provides technical support to the country's Expanded Program on Immunization (EPI). ALIMA's role is to strengthen collaboration between local and community actors to improve the demand for and continuity of immunization services. In 2023, ALIMA helped achieve the national BCG vaccine coverage target and significantly improved the coverage of several vaccines: the Penta3 vaccine surpassed the target of 88%, with a 5-point increase; the coverage of the RR1 vaccine exceeded the target of 87%, with an 8-point increase; and the OPV3 vaccine also exceeded the target of 88%, a 9-point improvement compared to the previous year.

TESTIMONY:



"I am very pleased with the close collaboration with ALIMA in planning provider training activities, community mobilization, and vaccination support. ALIMA's expertise and commitment have been valuable assets in successfully implementing these initiatives. Their ongoing support has significantly strengthened our capacity and improved the quality of health services for our population. I am confident that our partnership will continue to bring meaningful results for the well-being of our communities."

Regional Director of Health of Trarza, regarding the Capacity Building Project of the Expanded Plan for Immunization in Mauritania

NIGER

KEY PROJECT

Emergency Response to Improve Healthcare Access in Crisis-Affected Populations and Reduce Infant and Child Morbidity and Mortality in Tillabéry, Tahoua, and Maradi

The project aims to address urgent health and nutrition needs in crisis and insecure areas, particularly in the regions of Tillabéry, Tahoua, and Maradi. It focuses on improving access to health services for local populations, refugees, and displaced persons. Key activities include supporting six health centers in the management of severe acute illnesses, supporting pediatric care in four district hospitals, deploying five mobile clinics to provide primary care to remote populations, and strengthening medical referral systems. The project also offers psychosocial support services, including the mobilization of psychologists in the field and the care for survivors of gender-based violence. Additionally, it promotes health and family planning awareness and provides training for mothers and caregivers in early malnutrition detection. Furthermore, the project establishes community networks and epidemiological surveillance systems to enable a rapid response to health alerts, ensuring deployment within 72 hours.



people treated, including 87,659 children under the age of 5

OptiMA - Optimizing the treatment of Acute Malnutrition

ALIMA offers an innovative and simplified approach to managing malnourished children called OptiMA (OptiMA - Optimizing the treatment of Acute Malnutrition). This method is characterized by:

- a single anthropometric measurement, the Mid-Upper Arm Circumference (MUAC), along with oedema, to identify the condition;
- a single treatment, ready-to-use therapeutic food, with dosage adjustments based on the child's improving condition;
- training families in the early detection of children malnutrition using the MUAC bracelet, which features a simple color-coded system (green, orange, red) to assess the child's health and effectively prevent the risk of severe complications.

In 2023, the OptiMA strategy was implemented in Mali, Niger, Nigeria, and Chad. That same year in Niger, 52,115 children aged 6 to 59 months were treated.

TESTIMONY:



"I was an intern for eight months with BEFEN-ALIMA before I was given the opportunity to transition into fieldwork in Zinder, as a replacement cashier. At the same time, a new project in Tillabéry was being prepared. When it launched, I applied and was selected. As part of a capacity-building program, I underwent training at the Coordination Office in Niamey, where I worked alongside the Accounting Officer for a month. Unfortunately, I suffered a serious road accident during my time in Niamey: I woke up in the hospital after 72 hours in a coma. BEFEN-ALIMA was by my side throughout my entire hospitalization. My colleagues supported and visited me every day. I am grateful for BEFEN-ALIMA's professional and personal support."

Ibrahima, National Staff for BEFEN-ALIMA

NIGERIA

KEY PROJECT

Improving access to basic nutrition and healthcare services for IDPs and host communities in Borno, Yobe and Katsina States.

This project's principal objective is to reduce mortality, morbidity and vulnerability of Internally Displaced Persons (IDPs) and host communities affected by conflict in Borno (Jere LGA), Yobe (Karasuwa and Bade LGA) and Katsina (Kaita LGA) States. Through this project, ALIMA improved access to free, quality primary and secondary health care for displaced and host communities. This care included Sexual and Reproductive Health and clinical management of survivors of Gender-Based Violence. ALIMA also improved the provision of nutrition and health services for the prevention and treatment of severe acute malnutrition among children under 5, and ensured access to safe, environmentally conscious waste-management, sanitation and hygiene promotion in supported health centers and the surrounding population. This project was one of the most successful and strategic for ALIMA in 2023 as its aim was to reduce nutritional morbidity while targeting the crisis-affected population. ALIMA was able to build on this initiative and raise more funds through its approach of creating momentum for current projects.

44,715 😂



children suffering from malnutrition were cared for in the states of Borno, Katsina, and Yobe



INTEGRATE - A GLOBAL ALLIANCE AGAINST LASSA FEVER

This project is an international consortium of 15 leading research institutes, health facilities and humanitarian organizations from 10 countries working together to fight Lassa fever.

Coordinated by ALIMA and the CORAL (Clinical and Operational Research Alliance) platform, in collaboration with the Bernhard Nocht Institute for Tropical Medicine (BNITM) and the world's largest Lassa fever treatment centers – the Irrua Specialist Teaching Hospital (ISTH) and the Federal Medical Center Owo (FMCO) in Nigeria – this pioneering five-year study brings together research structures from West Africa, Europe and the USA. Its goal is to develop and implement an innovative approach to reduce Lassa fever mortality.

The INTEGRATE consortium is

- Setting up a clinical trial platform in West Africa to identify new and more effective drugs to treat Lassa fever and test their efficacy, tolerance and safety
- Building capacity for sustainable clinical research in West Africa through technology transfer and training
- Raising awareness about Lassa fever within local communities to destigmatize the disease and mitigate future outbreaks.

TESTIMONY:



"I had to flee my home due to the fighting in the region. I was lost and had no hope because I didn't know where to go. My son had been sick with diarrhea and fever for a week. I had no idea what to do or where to go for treatment because I had no money or food with me. I'm grateful to the community members who saw my need and led me to ALIMA. The workers were courteous and treated me for free. I'm grateful to ALIMA for the medical attention we received. I am delighted that my child is being treated." Amina, a mother who was displaced from Safana local government, Katsina state, due to violence.

Amina embarked on a risky journey with her sick seven-month-old baby in her arms, spending two nights sleeping in the harsh environment. Her ordeal is a reminder of the hardships that many internally displaced persons (IDPs) confront. Through referrals and outreach, Amina was found by the community, who led her to ALIMA for immediate medical attention in Batagarawa LGA. Amina and her child received free medical care - this humanitarian action provided them with more than just physical care; it also gave them a feeling of stability and optimism.

SUDAN

SOIGNER

INNOVER

ENSEMBLE

KEY PROJECT

Improving access to basic nutrition and healthcare services for crisis affected displaced and host communities in South Kordofan and North Darfur.

In April 2023, amidst the outbreak of a sudden conflict in Sudan's capital city Khartoum, ALIMA successfully continued working in parts of the country to provide help to Internally Displaced Persons (IDPs), and to host communities at two primary health care facilities (Mourta and Al Bardab) and one mobile clinic (Kadugli Bus Station). The project aimed to implement life-saving interventions through integrated Health, Nutrition, Water, Sanitation and Hygiene (WASH), and an emergency response and preparedness approach that ensured the humanitarian-development-peace nexus by increasing community and local stakeholders' engagement. The principal objective of the project was to reduce mortality, morbidity and vulnerability of IDPs and host communities affected by conflict in South Kordofan and North Darfur. To do so, ALIMA improved access to quality primary and secondary healthcare, including

Gender-Based Violence (GBV) and sexual and reproductive health services for the IDPs and host communities. ALIMA also improved access to and provision of nutrition services for the prevention and treatment of children under 5 suffering from severe acute malnutrition. We also ensured prevention of, and an immediate response to, emergency needs in the event of a crisis (displacements, epidemic, floods) in the supported States. In the same period, ALIMA provided life-saving interventions at Kadugli Teaching Hospital in Kadugli, South Kordofan for maternal and child health.

21,008

primary health care consultations from April 1st to December 31st, 2023



INF. D.BOnné

UKRAINE

Since 2022, ALIMA teams have been working to provide essential care to individuals impacted by the conflict, particularly those near the front line (Kherson and Mykolaiv). ALIMA has rehabilitated bombed healthcare facilities and enabled access to specialist doctors previously unavailable in the region (cardiologists, ophthalmologists, gynecologists, psychologists, etc.).

In 2023, a total of 22,838 specialized consultations were conducted, including 4,519 cardiology consultations, 4,176 ophthalmology consultations, 4,202 neurology consultations, and 4,821 mental health consultations. ALIMA has rehabilitated 12 structures according to the Ukrainian Ministry of Health standards, including the operating theater of the Berezan hospital, located 90 km southeast of Kiev, which has provided critical care to many warwounded individuals.

ALIMA has also improved the healthcare system's resilience by providing facilities with medical supplies, equipment, and essential medications.



consultations



ALIMA'S GOVERNANCE



In 2023, two new directors were elected to the Board of Directors (BOD), and one director was reappointed. The positions of Deputy Secretary and Vice-President have been established for the current term.

ALIMA's Board of Directors therefore has 21 members, including three co-opted members and four representatives from local NGO partners in Niger (BEFEN), Burkina Faso (Keoogo-SOS Médecins Consortium), Mali (AMCP-SP), and Chad (Alerte Santé).

THE BOARD OF DIRECTORS

Bureau of the Board of Directors

- Dr Richard Kojan President
- Rouafi Oumani Vice-President
- Augustin Augier Secretary
- Nicolas Mouly Deputy Secretary
- Marc Sauvagnac Treasurer

Members of the Board of Directors

- Aimé Makiméré
- Dr Amadou Dia
- Nicolas Chaltiel
- Frédéric Lemoine
- Augustin Augier
- Dr Bumni Ode
- Dr Chantal Gamba
- Diane Mukundji Tshimanga
- Dr Mouhamadou Doutchi
- Grace Loubassou

- Dr Lamine Kolle
- Lisebeth Aelbrecht
- Marc Sauvagnac
- Maurice Some
- Nadège Karo N'zue
- Dr Nahissa Moustapha Dan-Bouzou
- Dr Oummani Rouafi
- Ousmane Sawadogo
- Pauline Michavila
- Nicolas Mouly

MANAGEMENT COMMITTEE

The daily management and operations of the organization are overseen by the general management and its various executive departments.





Dr Moumouni Kinda CEO / Operations Director (Interim)

Henri Leblanc Deputy CEO





Lamine Fall Chief Financial and Administrative Officer





Guillaume Le Duc

Europe Director



Alexandre Makosza Head of Human Resources

Alexandra Seidel-Lauer Head of Development

ASSOCIATIVE LIFE

In December 2023, the number of members was 437. However, the year saw a significant increase in memberships, with activities resuming in October. The association places great importance on membership and member roles, ensuring that each member can fully engage and contribute.

In the fields of intervention, the association's actions are very dynamic, supporting activities that add value to the various operational projects (nutrition training, awareness-raising, blood collection, community accountability, etc.).

Several initiatives have been organized at ALIMA's headquarters to enliven the life of the association. Two "Happy ALIMA" events, which are informal and friendly gatherings, were held, with one leading to a debate on the topic: "How do members identify with the ALIMA association?". The systematic organization of briefings on governance and associative life for new arrivals has also helped to boost the association's activities.

ALIMA USA Board of Directors

ALIMA AUSTRALIA Board of Directors

ALIMA UK Board of Directors

- Dr Cecily Gallup President
- Bernard Yancovich Treasurer
- Pierre Cremieux Secretary
- Charlie Kunzer
- Catherine Dumait-Harper
- Anne Catherine Faye
- Alan Harper
- Glenda Hersh
- Dr Moumouni Kinda
- Diane Lawson
- Dr Alon Unger
- Robin Adelstein

- Dr Nikki Blackwell President
- Juanita Williams Secretary
- Dr Richard Kojan
- Sonia Girle
- Chris Brasher

- Stéphane Epin President
- Alexander Booth
- Henri Leblanc
- Dr Nikki Blackwell

FUNDRAISING

To finance its field operations, ALIMA raises funds from individuals, corporations, and foundations. Teams based in Dakar, Paris, New York, and London run fundraising campaigns throughout the year. These campaigns rely on private funds, which are flexible and enable ALIMA to respond more effectively to emergencies, invest in health professional training, and carry out research and innovation projects.

The General Public team, located in Dakar, launched two digital fundraising campaigns: "Prices are rising, and so is hunger," highlighting the rise of malnutrition faced by ALIMA's humanitarian workers daily, and "I'm starving," aimed at raising awareness about ongoing malnutrition in various parts of the world. Additionally, face-2-face marketing initiatives (in-person donor recruitment) have been conducted in France (Nantes, Montpellier, Lyon, Nice, and Île-de-France). ALIMA is committed to keeping its donors informed about the impact of their contributions through newsletters and a biannual publication.

In Paris, the Major Donors team raises funds from corporations, foundations, and individuals. Supported by the European Campaign Committee, which advises on prospecting, the team organized an end-of-year event where ALIMA donors engaged with specialists on two themes: adapting humanitarian efforts to climate change, and the role of research and innovation in managing child malnutrition in the Sahel. ALIMA also secures funding through its Foundation to support long-term initiatives carried out by ALIMA and its partners.

COMMUNICATION

In 2023, ALIMA gained significant media attention with 12 interview invitations, 27 media requests to comment on current affairs, seven press releases, and 28 media alerts, resulting in 62 pieces of media coverage. Additionally, two articles were published in France. The department welcomed a new Director in September.



In New York, the ALIMA USA team contributes to ALIMA's global fundraising efforts by cultivating relationships with foundations, corporations, and private donors based in the United States and Canada through digital fundraising campaigns, email appeals, and personal outreach. In 2023, ALIMA USA organized two fundraising events: a gala in New York and a cocktail party in Santa Monica, CA. Additionally, ALIMA USA launched the "Breath for All" digital campaign, a fundraising initiative aimed at highlighting the need to improve access to medical oxygen in sub-Saharan Africa.

SOCIAL MEDIA: FOLLOW US!



THANK YOU FOR YOUR SUPPORT

The entire ALIMA team would like to thank all of the major donors, foundations, companies and technical and financial partners. Thanks to your support, ALIMA mobilized the necessary resources to implement its operational and research projects in order to help the most vulnerable and transform humanitarian medicine.

MAJOR DONORS

A big thank you to major donors who helped raise 1.2 million euros in 2023. The funds collected will contribute to three strategic funds:

- » the emergency response fund,
- » the research and innovation fund,
- » the humanitarian talent fund.

RESEARCH PARTNERS

- Ministries of Health and Public Institutes in our countries of operation
- Inserm (National Institute of Health and Medical Research), France
- ANRS | Emerging infectious diseases, France
- **PAC-CI** (ANRS I Emerging infectious diseases in Côte d'Ivoire program), Côte d'Ivoire
- **ISPED Bordeaux** (Institute of Public Health, Epidemiology and Development), France
- Oxford University, United Kingdom
- ALERRT (African coaLition for Epidemic Research, Response and Training)
- **BNITM** (Bernard Nocht Institute for Tropical Medicine), Germany
- **DNDi** (Drugs for Neglected Diseases initiative), Switzerland
- NiH/NIAID (National Institutes of Health), United States
- SickKids Hospital Toronto, Canada
- IREIVAC (Innovative Clinical Research Network in Vaccinology), France

INSTITUTIONAL PARTNERS



FONDATIONS AND CORPORATES





ENVIRONMENT

Since 2021, ALIMA has been actively committed to strengthening the resilience of health systems in Africa to climate change while also reducing the environmental impact of its humanitarian actions.

Seven ALIMA missions have already developed and implemented environmental action plans following specialized training sessions. A total of 250 employees have received training on the environmental impact of their operations. ALIMA has initiated a significant transition to renewable energy sources, with 10% of the healthcare facilities it supports now equipped with solar installations.

In 2023, three specific projects were launched: the PLASTIK project in Ouagadougou (Burkina Faso) and N'Djamena (Chad) to reduce pollution from medical-nutritional interventions; the CRESH project in Ngouri (Chad) to test and document the concept of the resilient hospital, as theorized by the WHO; and the CLEAN project to encourage the use of solar energy, less polluting modes of transport, and waste management in health facilities acrossTélimélé (Guinea) and Mirriah (Niger).

ALIMA continues to monitor its environmental impact and assess the effectiveness of its mitigation measures. It has published its 2022 Carbon Footprint, available on ALIMA's website.



*Prevention of Sexual Exploitation and Abuse Policy

ALIMA prioritizes the Prevention of Sexual Exploitation and Abuse (PSEA), emphasizing its commitment to protecting vulnerable groups, particularly women and children, from sexual exploitation, abuse, and harassment. This commitment includes regular training and awareness programs for all employees, adherence to a code of conduct, and the establishment of a reporting and case management system to uphold high standards and mitigate risks. ALIMA affirms its commitment to a zero-tolerance policy towards abuse of power, sexist behavior, and sexual violence. This commitment extends beyond its staff to include partners and any third parties collaborating with the organization.



*Prevention of Sexual Exploitation and Abuse

TRAININGS

Certain that the sustainability of humanitarian impact depends on continuous and specialized training, ALIMA places this at the heart of its mission for both its employees and local partners. 16 training scholarships were awarded and 456 people were trained in ALIMA's support and operational functions. These efforts were primarily aimed at developing the skills of personnel in countries where ALIMA operates. Other training sessions focused on ALIMA's support functions and cross-cutting subjects, as well as topics specific to the different intervention sectors (pediatrics, epidemiology, statistics, etc.).

To improve the training provided and meet ALIMA's operational requirements, impact studies and post-training follow-up systems were carried out in 2023. Special attention was given to issues surrounding negotiation and humanitarian access, with a focus on highlighting best practices among ALIMA's humanitarian actors and leveraging their expertise in this area. In 2023, support was also provided to intervention countries through field visits and training sessions on support systems. These efforts included strengthening managerial skills to better support teams and optimize performance.

Patients are waiting for a medical consultation at the community care site set up by ALIMA in the village of Mandro, Ituri, Democratic Republic of the Congo. Community care sites bring care closer to those who live farthest from health centers.

GRA

FINANCIAL REPORT

OPERATIONAL BUDGET

ALIMA's budget for 2023 was €75.1 million, an increase of approximately 6.2% compared to 2022





REVENUES

REVENUE STATEMENT		
in K€	2023	2022
Operating income	75,106	70,764
Operating expense	75,010	71,696
Operating Result	95	-932
Financial gain	826	296
Extraordinary gain/loss	-5	-2,4
Net income	900	-638
ASSETS		
in K€	2023	2022
Fixed assets	489	485
Cash, receivables, and other assets	80,326	47,360
Accruals and deferrals	590	725
Total Liabilities and Equity	81,407	48,570
LIABILITIES		
in K€	2023	2022
Retained Earnings and Reserve Fund Other Associative Capital	2,052 2,000	1,152 2,000
Risk provision	305	365
Liabilities (+ 1 year)	4.8	4.8
Liabilities (- 1 year)	76,971	44,540
Total Liabilities	81,407	48,570

2023 FINANCIAL REPORT

ALIMA's financial balance sheet for 2023 remains higher than the previous year, with &81,407 million in 2023 compared to &48,570 million in 2022.

EXPENSES

Each year, the majority of resources are allocated to field projects (92.7%). ALIMA's charter is clear: "Putting the Patient First." In 2023, ALIMA continued to invest in fundraising efforts, securing €2.5 million.



FINANCIAL TRANSPARENCY

ALIMA is regularly audited by its institutional financial partners. In 2023, 10 external audits were conducted, with positive results and ineligible expenditures amounting to approximately 0.1% of our contract volume.

Lastly, the 2023 annual accounts were certified by the statutory auditor without any reservations.



CARING | INNOVATING | TOGETHER

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